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REMARKS/ARGUMENTS

Applicants thank Examiner Mohamed for the courtesy he extended and the help he provided to Mi Kim on May 9, 2005, regarding the only remaining outstanding issue in the instant application (set forth in the Advisory Action at page 2).

As discussed with the Examiner, Applicants submit that the phrase "who has not been diagnosed with non-insulin dependent diabetes mellitus (NIDDM)" does not add new matter. As one example of support in the specification, in one embodiment of the invention, originally filed claim 24 is directed to treating a human with impaired glucose tolerance (IGT) by administering to the human a composition comprising a compound that binds to a receptor for GLP-1 in an amount effective to retard or arrest the development of non-insulin dependent diabetes mellitus. As shown by this claim, Applicants contemplated, at the time of filing, that the subject of claim 24 had IGT, but whose condition had not progressed to a point as to be diagnosable as having NIDDM, thereby allowing for the ability to retard or arrest the development of NIDDM.

As another example of the support that can be found in the specification, the phrase finds support at least in the examples, at page 14 to page 24, of the specification. In one aspect, the examples describe the differences in glucose responsiveness between subjects who had impaired glucose tolerance (IGT) and those who had NIDDM, in response to GLP-1 administration. One manner of distinguishing between the two conditions is a subject's plasma glucose response to an oral glucose tolerance test. In general, IGT is a condition that can be characterized by early subtle defects in pancreatic beta cell function. If the condition of IGT progresses sufficiently, it can lead to definitive loss of glucose control and to the diagnosis of NIDDM.

In the instant examples, two groups are being compared - those subjects with IGT and those with NIDDM, see Tables 2 and 3 for differences between the groups. In order to do an accurate comparison, the IGT patient population must be one whose glucose control had not deteriorated to the point as to be diagnosable as having NIDDM. If a subject in the IGT group had such loss of glucose control as to have progressed to

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NIDDM, he could not have been included in the IGT study population. Applicants submit that it is this study population that is being recited in the instant claims. Accordingly, the specification supports, at the very least provides inherent support for, the patient population claimed. In light of the reasons provided, Applicants respectfully request reconsideration and withdrawal of the rejection based upon alleged new matter.


The Examiner also pointed out typographic errors in the specification, which Applicants have corrected, as well as others, in the instant Response. No new matter is introduced by the instant amendments.

CONCLUSION

Applicants respectfully submit that all the pending claims are now in condition for allowance and request that a timely Notice of Allowance be issued in this case. The Examiner is encouraged to call the undersigned attorney to discuss any issues related to the prosecution of the instant application.

Applicants believe that no additional fee is necessitated by the instant paper. However, in the event any additional fees are due or any amount is to be credited, Applicants authorize the Commissioner of Patents to debit or credit Deposit Account No. 010535.

Respectfully submitted,


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